

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | (HN)     |        | 04-18-01 |
| O.I.P.E. CLASSIFIER       |          | 106    | 5/9      |
| FORMALITY REVIEW          |          |        | 5/6/01   |
| RESPONSE FORMALITY REVIEW |          |        |          |

BEST AVAILABLE COPY

## INDEX OF CLAIMS

|                        |            |   |              |
|------------------------|------------|---|--------------|
| ✓                      | Rejected   | N | Non-elected  |
| =                      | Allowed    | I | Interference |
| — (Through numeral)... | Canceled   | A | Appeal       |
| ÷                      | Restricted | O | Objected     |

| Claim | Date     |
|-------|----------|
| Final | Original |
| 1     | 02/08/01 |
| 2     | 04/01/01 |
| 3     | 04/01/01 |
| 4     | 04/01/01 |
| 5     | 04/01/01 |
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| Claim | Date     |
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If more than 150 claims or 10 actions  
staple additional sheet here

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A-5  
6-26-01